

**Indiana Professional Licensing Agency  
Nursing Board (Group 2)  
402 W. Washington St. Room W072  
Indianapolis, IN 46204**



**Your license has expired.** Online renewal is available for approximately 18 months after your license has expired. Info to renew online is below. To renew by mail - please return this entire page to the address above after answering all questions on the form. Be sure to enclose your **renewal fee for an expired license (\$110.00)**. Checks should be payable to: **“Indiana Professional Licensing Agency”**.

CSR - PRESCRIPTIVE AUTHORITY Expired Renewal Form				
Enter Full Name:          Mail To: Indiana Professional Licensing Agency 402 West Washington Street Room W072 Indianapolis IN 46204  Circle the appropriate answer to questions at the right and sign renewal form. Failure to answer questions and/or sign the renewal form WILL delay your renewal.  I hereby swear or affirm under the penalties of perjury that I understand and have answered the questions true to the best of my knowledge.	<u>CSR Number</u>		<u>Date Expired</u>	
			<u>Expired Renewal Fee</u> \$110.00	
	<b>SINCE YOU LAST RENEWED OR IF FIRST RENEWAL:</b>			
	1.	Have you been convicted of, plead guilty or nolo contendere to:  A.) A violation of any federal, state, or local law relating to the use, distribution, manufacturing, or dispensing of controlled substances or are formal charges pending?	YES	NO
		B.) To any offense, misdemeanor or felony in any state (except minor traffic laws/fines) or are formal charges pending?	YES	NO
2.	Have you ever had any action, discipline or revocation on your DEA (U.S. Drug Enforcement Administration) registration or entered into a Memorandum of Understanding (MOU) on said registration?	YES	NO	
3.	Have you prescribed or dispensed controlled substances under your expired APN registration?	YES	NO	
<u>Signature Of Applicant</u> (respond Yes or No to all questions)			<u>Date Signed</u>	
<u>Enter change of address***</u>				

### **CONTROLLED SUBSTANCES REGISTRATION RENEWAL APPLICATION**

- YOU MUST HAVE A CURRENT RN LICENSE AND PRESCRIPTIVE AUTHORITY AUTHORIZATION AND SUBMIT A COPY OF YOUR CURRENT COLLABORATIVE PRACTICE AGREEMENT IN ORDER TO RENEW THE CSR.**
- \*\*\*If you have a change in practice address, you MUST include a new collaborative agreement. To have a PO Box address, you must also include the street address for processing.
- RN, Prescriptive Authority and CSR renewals are mailed separately. The renewals for your RN license and Prescriptive Authority Authorization will be mailed to your home address. The forms may all be mailed back in one envelope with one check.
- A separate CSR is needed for each location that you administer or dispense controlled substances. If you are only prescribing controlled substances at multiple locations, you only need one CSR.
- The Expired CSR renewal fee is \$110.00 (\$60 renew fee plus \$50 late fee).
- Your certificate and reference card will become VOID and a twenty (\$20.00) service charge will be assessed if a non-collectible check is received. Renewal fees are non-refundable.
- Please feel free to contact the Nursing Board by email at [pla2@pla.in.gov](mailto:pla2@pla.in.gov) or by phone at (317) 234-2043. You can also visit us online at: [www.pla.in.gov](http://www.pla.in.gov).